

Representative
Jeanne
Edwards

#### How to Contact Me:

Olympia Office: 321 John L. O'Brien Building P.O. Box 40600 Olympia, WA 98504-0600 (360) 786-7900

*E-mail:* edwards\_je@leg.wa.gov

Home Page: http://hdc.leg.wa.gov/ members/edwards/

**Legislative Home Page:** www.leg.wa.gov

#### **Committees:**

- Health Care
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*Toll Free Legislative Hotline:* 1-800-562-6000

**Hearing Impaired Hotline:** 1-800-635-9993

## Representative Jeanne Edwards

**1st Legislative District** 

# A REPORT TO THE 1st DISTRICT

January 2004

Dear neighbor,

I hope you and your loved ones are starting the year with high spirits and in good health. It is a true privilege to represent you in Olympia. Once again we're all geared-up to make the best out of this 60-day Legislative Session.

There are many significant issues to bring to the floor and, as always, my interest is in addressing those that hold the most importance to you.

My work will reflect our district's community concerns, especially those related to economic development, continuing to improve our transportation system, intelligent investments in education and assuring quality health care for our families.

Thank you for reviewing my newsletter today. I want to take this opportunity to wish you the very best this New Year and let you know how much I appreciate your letters, e-mails and telephone communication. Please continue to stay in touch with your comments and questions. I value your input. Your involvement in the government process is crucial and it helps me carry out my job, which is to serve you.

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Sincerely,

Yeanne Edwards State Representative



# Representative Jeanne Edwards

### **The Budget**

Last year we had to adopt a budget that left us with a huge gap. This session we'll write a much smaller, supplemental budget to reflect changes in the economy since last spring. My priority, as far as the budget goes, is that it reflects fairness.

With more young people attending our schools and larger social-service caseloads, we'll consider recommendations from the second round of work done by the Washington Competitiveness Council — a group of labor, education, business, and civic leaders who have been researching ways to kick-start our economy.

The governor released his new budget proposal a few weeks ago. Following several of the Competitiveness Council recommendations, his plan moves our state — at least in some cases — down the correct path. It's a good starting point for budget negotiations between the House and the Senate.



The bottom line is that our policies should build jobs that we can count on to be there tomorrow.

To achieve such an objective, we need budget provisions and state policies that provide:

- Greater support for colleges and industries that rely on research-and-development work to outrace competitors in other states and nations.
- Better funding for worker-training *and retraining* programs.
- More use of apprentices in public-works projects.
- Stronger help for schools where students are at-risk of falling behind.

Making health care affordable and dependable It is an outrage and an injustice that people who work hard and play by the rules can't afford health insurance for their families.

We need real reforms that make health coverage more affordable for all: for everyday workers, for kids and for seniors.

#### What about medicines from Canada?

I'm sure you, or someone you know in our 1st. district, is paying double or triple for the same prescription drugs available from our northern neighbor for pennies on the dollar. We could save millions of taxpayer dollars by having the state buy prescription medicines from Canada.



#### Less paperwork, more effective work

Ask your doctor about paperwork. Most doctors have full-time employees who spend all day wrestling with piles of paperwork from all the different HMO's, insurers and government programs. It's a nightmare.

Some experts say paperwork and administration costs eat up 30 cents of every dollar you spend on health care. That makes the federal government look efficient, since Medicare spends 2 cents on administration and 98 cents on actual doctors and health care for patients.

### A REPORT TO THE 1st DISTRICT



We have to pass strong reforms to slice through all this red tape before it strangles our health care system.

#### **Patient safety**

Doctors need relief from malpractice insurance costs. Some are quitting or moving their practice because of the costs, especially for high-risk practices.



We should learn from other states and not repeat their mistakes. Places like California tried to solve this problem by limiting a person's right to a jury trial. It hasn't worked; doctors are actually paying more in states that passed this so-called reform.

A better solution is to attack the problem by preventing the medical errors that lead to malpractice suits.

- Today, rules prevent hospitals from sharing information about medical errors that lead to patient injuries or death. To save lives, those rules need to change.
- It's only a small percentage of bad doctors who cause the majority of malpractice lawsuits. There's no reason your good family doctor, who's never been sued, should pay the high costs caused by the negligence of a few.

Fit drivers: safer roads

There's no denying we live in a car-dependent society. While more attention is focused on teenage drivers, because they are by far the highest risk group, we have to realize that senior drivers — age 75 or older — also represent a factual and growing dilemma on our roads.

One of my priorities is to offer a viable solution to this problem. I'm tired of the way our society often underestimates senior citizens. This session I am introducing a bill that addresses the issue of senior drivers with fairness.

What some people propose is NOT fair. They want officials at the Department of Motor Vehicles to decide whether a senior should drive. I believe that would lead to hasty, cookie-cutter decisions on what really is a complicated medical decision.



Doesn't it make more sense to have the best possible expert – such as your family doctor – decide whether or not your health poses risks if you get behind the wheel? Leaving the entire task to the Department of Licensing would be senseless because DOL officers are not trained to determine the health status of any driver.

This is why my proposal will ask licensed physicians or other proper authority (such as osteopaths, optometrists, etc.) to report to the Department of Licensing any patient who has a health condition that poses an imminent danger to the health or safety of the patient or anyone else.

This new law will provide the medical authorities legal immunity from either failing to report a patient or for reporting a patient, meaning doctors will not be

(continued on back page)



# Representative Jeanne Edwards

# Fit drivers: safer roads cont'd

held liable in any law suits should a patient be involved in an accident.

I want to highlight that the license of a senior driver will remain effective for the same, current five year period. However, all senior drivers must submit certification forms every two years, starting at age 75, to verify they are fit to drive. If they are found <u>not</u> to be fit,



the Department of Licensing will require them to come in person for further testing.

Seniors understand that driving doesn't rely on merely passing a vision test; many other factors play a part in keeping drivers and pedestrians safe. They are aware of the need for extra caution as they age.

This new bill is designed both to give senior drivers peace of mind, and to protect their independence. With the physician evaluations we'll make sure to take off the road only those people who are truly a risk to themselves and others.

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Rep. Jeanne Edwards P.O. Box 40600 Olympia, WA 98504-0600